# **2**003

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transmitted to the USPTO (703) 746-4000, on the date indicated below. Martin A. Hay MAY 2 7 2005 13 Queen Victoria Street Macclesfield Cheshire UK, SK11 6LP UNITED KINGDOM PADEMAR Martin A. Hay A - War (Signar 27 (4) (Date) 2045 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR CONFIRMATION NO. ATTORNEY DOCKET NO. 10/754,923 01/12/2004 John Walter Liebeschustz 00219/US1 8351 LE OF INVENTION: SERINE PROTEASE INHIBITORS APPLN, TYPE SMALL ENTITY ISSUB FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUN NO \$1400 nontrovisional 5300 06/16/2005 EXAMINER ART UNIT CLASS-SUBCLASS HABTE, KAHSAY 514-252140 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Martin A. Hay the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ELI LILLY AND COMPANY Indianapolis, Indiana Please check the appropriate easignee category or categories (will not be printed on the patent): 🚨 Individual 📓 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fcc(s): lasue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fec(s), or credit any overpayment, to Deposit Account Number 50-1230 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27. D b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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PAGE 3/3 \* RCVD AT 5/27/2005 10:08:23 AM [Eastern Davlight Time] \* SVR:USPTO-EFXRF-2/0 \* DNIS:7464000 \* CSID:01625500058 \* DURATION (mm-ss):01-52



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